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September 25, 2003

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GROUP: 1635

FAX NUMBER: 1-703-872-9306

ATTORNEY DOCKET NO.: RTS-0258

SERIAL NO.: 09/910,185

FILED: July 18, 2001

NUMBER OF PAGES: 14
(including this sheet)

MESSAGE: Attached is an Amendment Transmittal Letter (in duplicate) and
Amendment in Response to Office Action dated June 27, 2003.

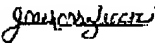
URGENT! PLEASE DELIVER IMMEDIATELY UPON RECEIPT. THANK YOU!

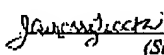
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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. RTS-0258	
Applicant(s): Bennett and Freier					
Serial No. 09/910,185	Filing Date July 18, 2001	Examiner J. Zara	Group Art Unit 1635		
Invention: ANTI-SENSE MODULATION OF GLIOMA-ASSOCIATED ONCOGENE-3 EXPRESSION					
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<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	13	20	0	x \$18.00	\$0.00
INDEP. CLAIMS	1	3	0	x \$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ Signature			Dated: September 25, 2003		
Jane Massey Licata Reg. No. 32,257 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence		
CC:					

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. RTS-0258	
Applicant(s): Bennett and Freier				
Serial No. 09/910,185	Filing Date July 18, 2001	Examiner J. Zara	Group Art Unit 1635	
Invention: ANTISENSE MODULATION OF GLIOMA-ASSOCIATED ONCOGENE-3 EXPRESSION				
<p>I hereby certify that this <u>Reply under 37 C.F.R. 1.111</u> (Identify type of correspondence)</p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>)</p> <p>on <u>September 25, 2003</u> (Date)</p> <p><u>Jane Massey Licata</u> (Typed or Printed Name of Person Signing Certificate)</p> <p><u></u> (Signature)</p> <p>Note: Each paper must have its own certificate of mailing.</p>				